

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 844278 (2)
1. Corporation Name
AIR FLITE OPERATIONS, INC.

Principal Place of Business
950 SE 12TH ST
HIALEAH FL 33010

Mailing Address
950 SE 12TH ST
HIALEAH FL 33010

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/02/1979	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2073398	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent FINAZZO, NICOLAS 950 SE 12TH STREET HIALEAH FL 33010		10. Name and Address of New Registered Agent 81 Name POLK, RHONDA S. 82 Street Address (P.O. Box Number is Not Acceptable) 950 S.E. 12th STREET 83 84 City HIALEAH FL 85 Zip Code 33010	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Rhonda S. Polk, Asst. Secretary* 5/6/98
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPC BATCHELOR, GEORGE E. 950 SE 12TH ST HIALEAH FL ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	SEE ATTACHED LIST ☐ Change ☐ Addition FOR ADDITIONAL OFFICERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WALKER, RAYMOND 950 SE 12 ST. HIALEAH FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HIGGINS, JOHN 950 SE 12TH ST HIALEAH FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MESECHER, BOYD 950 SE 12TH ST. HIALEAH FL ☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	V ☐ Change ☒ Addition SIMKOVITZ, LEONARD
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DAWSON, HUMPHREY 950 SE 12TH ST. HIALEAH FL ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BATCHELOR, MARIANNE T 950 SE 12TH AT HIALEAH FL ☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☒ Change ☐ Addition HIALEAH, FL

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Rhonda S. Polk, Asst. Secretary* 4/13/98 (305) 889-6222

CR2E034 (10/97)

OFFICERS & DIRECTORS

COMPANY: AIR FLITE OPERATIONS, INC.

<u>Title</u>	<u>Name</u>	<u>Address</u>
D	Ferraresi, Daniel J.	950 S.E. 12th Street Hialeah, FL 33010
AS	Polk, Rhonda S.	950 S.E. 12th Street Hialeah, FL 33010